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FAX NUMBER TRANSMITTED TO: (703) 872-9306

To: Examiner Paul T. Chin, Art Unit 3652
Of: U.S. Patent and Trademark Office
From: Rosenbaum & Associates, P.C.
Client/Matter: 6045-006
Date: Monday, June 20, 2005

DOCUMENTS	NUMBER OF PAGES*
Transmittal document	1
Amendment Transmittal (1 page in duplicate)	2
Amendment and Response to Restriction Requirement	5
TOTAL	8

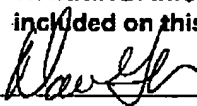
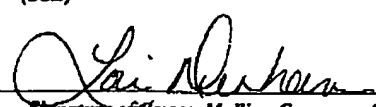
COMMENTS: In Re: U.S. Serial No. 10/719,076
Applicant: David Roberts
Attorney Docket No. 6045-006

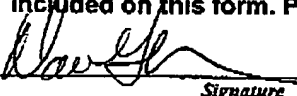
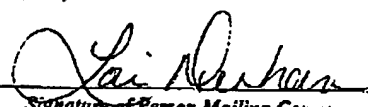
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A PROFESSIONAL CORPORATION PRACTICING INTELLECTUAL PROPERTY LAW
650 DUNDEE ROAD • SUITE 380 • NORTHBROOK, ILLINOIS 60062
TELEPHONE (847) 770-6000 • FACSIMILE (847) 770-6006

AMENDMENT TRANSMITTAL LETTER (Small Entity)					Docket No: 6045-006	
Applicant(s): David Roberts						
Application No. 10/719,076	Filing Date 11/21/03	Examiner Paul T. Chin	Customer No. 29,335	Group Art Unit 3652	Confirmation No. 2234	
Invention: AN IMPROVED CULINARY TOOL FOR TRANSPORTING FOOD OBJECTS						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application.						
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	11 -	20 =	0	x \$25.00	\$0.00	
INDEP. CLAIMS	1 -	3 =	0	x \$100.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 18-2000 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 _____ Signature			Dated: June 20, 2005 <i>Certificate of Facsimile Transmission</i>			
David G. Rosenbaum (Reg. No. 31,872) ROSENBAUM & ASSOCIATES, P.C. 650 Dundee Road Suite #380 Northbrook, IL 60062 Tel: (847) 770-6000 Fax: (847) 770-6006			I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on June 20, 2005 to (703) 872-9306 . (Date)  _____ Signature of Person Mailing Correspondence Lori Dunham _____ Typed or Printed Name of Person Mailing Correspondence			
cc:						

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TOTAL CLAIMS	11	20	0	x \$25.00	\$0.00	
INDEP. CLAIMS	1	3	0	x \$100.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
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<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 18-2000 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">  Signature David G. Rosenbaum (Reg. No. 31,872) ROSENBAUM & ASSOCIATES, P.C. 650 Dundee Road Suite #380 Northbrook, IL 60062 Tel: (847) 770-6000 Fax: (847) 770-6006 </div> <div style="width: 50%;"> Dated: June 20, 2005 Certificate of Facsimile Transmission I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first-class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on June 20, 2005 to (703) 872-9306. (Date)  Signature of Person Mailing Correspondence Lori Dunham Typed or Printed Name of Person Mailing Correspondence </div> </div>						
cc:						


JUN 20 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: D. David Roberts Attorney Docket: 6045-006
Serial No.: 10/719,076 Examiner: Chin, Paul T.
Filed: 11/21/2003 Art Unit: 3652
Title: An Improved Culinary Tool for Transporting Food Stuff

Certificate of Facsimile Transmission

I certify that this document (along with any documents referenced as being included herewith) is being transmitted on June 20, 2005 to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, ATTN: Examiner Paul T. Chin, Art Unit 3652 at (703) 872-9306.


Lori Dunham

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE TO RESTRICTION REQUIREMENT

Dear Sir:

In response to the Office action of May 20, 2005, please amend the above-identified patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 4 of this paper.